FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

SECTION A - PROPERTY OWNER INFORMATION							For Insurance Compeny Use:
Building OWNER's NAME Brad Miller, Trustee of Marion Miller Irrevocable Trust							Policy Number
BUILDING STREET ADD 441 Onto Drive	RESS (Including A	vpt. Unit, Suite, and/o	r Bidg. No.) OR P.O. ROUTE	AND BOX	CNO.		Company NAIC Number
CITY			STATE		ZII	PCODE	
Central Point			OR		97	502	
Lot 58 Miller Estates Subx	Wision, Phase 2, A	Planned Community					
Residential			saory, etc. Use a Comments				
LATITUDE/LONGITUDE (##°-##'-##,##" or ##			ONTAL DATUM: 27 NAD 1983	SO	URCE: GPS		
	3	ECTION B - FLOOD	INSURANCE RATE MAP	(FIRM) IN	ORMATION		
81. NEIP COMMUNITY NAME	& COMMUNITY NUM	BER	B2. COUNTY NAME		·	B3.	STATE
Jackson County 415589			Jackson			OR	
B4, MAP AND PANEL	1		87, FIRM PANEL	7			B9. BASE FLOOD ELEVATION(S)
NUMBER 415589-0402	B5. SUFFIX B	96. FIRM INDEX DATI 4-1-1982	EFFECTIVE/REVISED 4-11982		88. FLOOD ZON A-8	E(S)	(Zone AO, use depth of flooding) 1239
B10. Indicate the source of the							
	□ firm	Community De	_ -	ver (Describ			
B11. Indicate the elevation da					Other (Descri		
B12, is the building located in	a Coastal Barrier Re	esources System (CBR	S) area or Otherwise Protected	Area (OPA)	? 🗌 Yes 🗵	No D	esignation Date
	SEC	TION C - BUILDING	ELEVATION INFORMATION	ON (SURV	YEY REQUIRED) }	
C1. Building elevations are ba			Building Under Construction		Finished Construc		
O I' how on A rectangular are or		-	•	, 85.77 s		ac.n.	
14 nous Elevation Codific							
*A new Elevation Certific				e# / * 1			+ O + 4 T K + M common
C2. Building Diagram Numbe	r <u>2</u> (Select the buildin	ng diagram most skrišai	r to the building for which this ca	ntificate is be	sing completed - 9	ee page	s 8 and 7. If no diagram
C2. Building Diagram Numbe accurately represents the	r2 (Select the building provide a :	ng diagram most sknitar sketch or photograph.)	to the building for which this ca		_	ee page	s 8 and 7. If no diagram
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BUILDING STREET ADDRESS (Including Apt., Unit. Suite, and/or Bidg. No.) OR P.O. R 441 Orth Drive CITY- Central Point SECTION D - SURVEYOR, ENGINE Copy both sides of this Elevation Certificate for (1) community official, (2) insura COMMENTS C3a) Manufactured Home lowest floor is the ground under structure has conce	STATE OR	ZIP CODE 97502	Policy Number Company NAIC Number	
CITY- Central Point SECTION D - SURVEYOR, ENGINE Copy both sides of this Elevation Certificate for (1) community official, (2) insura COMMENTS	OR	97502		
SECTION D - SURVEYOR, ENGINE Copy both sides of this Elevation Certificate for (1) community official, (2) insura COMMENTS				
Copy both sides of this Elevation Certificate for (1) community official, (2) insura COMMENTS	ER, OR ARCHITECT CEN			
COMMENTS			0)	
* * * * * * * * * * * * * * * * * * * *	ance agent/company, and (3)	building owner.		
MICH PROPERTY OF CHARGE STANDALL ROLL BY BING CREATERS STRUCK PROPERTY IN THE CALL AND CONTRACT OF THE CALL AND CONTRACT	ento black foundation			
C3e) Lowest equipment is a heat pump	ESE DIOOK FOUR RESIDENT			
310) BFE was provided per construction drawings by CEC Inc.				
· ·			Check here if attachment	
SECTION E - BUILDING ELEVATION INFORMATION (S	URVEY NOT REQUIRED	FOR ZONE AO AND ZO	NE A (WITHOUT BFE)	
rZone AO and Zone A (without BFE), complete Items E1 through E4. If the E	Jevation Certificate is intended	for use as supporting informa	tion for a LOMA or LOMR-F,	
otton C must be completed.				
. Building Diagram Number(Select the building diagram most similar to the I	building for which this certifical	e is being completed - see pa	ges 6 and 7. If no diagram accurately	
represents the building, provide a sketch or photograph.)	lo 91/m) in (am) [TT] ata	aun ar 🗀 balau/abadi ana'	the highest adjacent arada. Il isa	
. The top of the bottom floor (including basement or enclosure) of the building: natural grade, if available).	(2 _ (c((i)) _)(c((0)) _ au	TAS OL TO DRIOM (CLISCK OLIS)	Insa tiduace solonos disono: Insa	
For Building Diagrams 6-8 with openings (see page 7), the next higher floor of	or elevated floor (elevation b) (of the building is ft.(m)i	n.(cm) above the highest adjacent	
grade. Complete items C3.h and C3.i on front of form.				
. The top of the platform of machinery and/or equipment servicing the building	isft.(m)in.(cm) [ab	ove or 🔲 below (check one)	the highest adjacent grade. (Use	
natural grade, if available).	na 8 3 16	Mile and Committee of the Mile and Committee of the Commi	1 1	
For Zone AO only: If no flood depth number is available, is the top of the bot Yes No Unknown. The local official must certify this information.	tom floor elevated in accordan	ion with the community's flood	plain management ordinance /	
SECTION F - PROPERTY OWNER (ATATIVE) CERTIFICATION	/M	
he property owner or owner's authorized representative who completes Section				
ssued BFE) or Zone AO must sign here. The statements in Sections A, B, C,		• **	stocker Energodos or constituing	
ROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S				
DDRESS	CITY	STAT	E ZIP CODE	
KGNATURE	DATE	TELE	TELEPHONE	
OMMENTS				
			Check here if attachment	
	MUNITY INFORMATION (A many and a state of	
s local official who is suthorized by law or ordinance to administer the commun	nity's floodplain management o	ordinance can complete Section	ons A, B, C (or E), and G of this Eleva	
difficate. Complete the applicable item(s) and sign below The information in Section C was taken from other documentation that h	assertate banais and ambases	of by a licaneari surveyor end	incor or architect who is suthorized b	
or local law to certify elevation information. (Indicate the source and date			HOLL MANAGEMENT HAT A CANONICAL A	
. A community official completed Section E for a building located in Zone			ne AO.	
i. \square The following information (items G4-G9) is provided for community flood	Iplain management purposes.			
A. PERMIT NUMBER G5. DATE PERMIT ISSUED	GC GC). DATE CERTIFICATE OF COV	PLIANCE/OCCUPANCY ISSUED	
. This permit has been issued for: New Construction Substantial Imp	provement	A / 3	. Date con	
. Bevation of as-built lowest floor (including basement) of the building is: . BFE or (in Zone AO) depth of flooding at the building site is:		ft.(m) ft.(m)	Datum: Datum:	
			Daum	
OCAL OFFICIAL'S NAME DAVE ARKENS	TITLE	cfm		
OMMUNITY NAME	CA. TELEP	HONE 664 -	7602	
IGNATURE OF CIENTRAL	DATE			
Dan Coll	24 14 lb	12/13/	2005	
OMMENTS				
			Check here if attachment	

Dec 9 2005 10:14 P.02